

FORM PTO-1449 (modified)  
 To: U.S. Department of Commerce  
 (PW FORM PAT-1449)  
 Patent and Trademark Office

Information Disclosure Statement by Applicant

Attorney Docket No.: 2599-0002

Client Reference No.:

Applicant: BEHN, Kristofor R. et al.

Appln. No.: To be assigned

Filing Date: March 30, 2004

Date: March 30, 2004

Page 1 of 1

Examiner: To be assigned

Group Art Unit: To be assigned

U.S. PATENT DOCUMENTS

Examiner's Initials		Document Number	Date MM/YYYY	Name (Family Name of First Inventor)	Class	Sub Class	Filing Date (if appropriate)
	AR	4,751,896	06/1988	Miley			
	BR	5,150,504	09/1992	Cohen			
	CR	D423,675	04/2000	Ramos, IV			
	DR	D410,971	06/1999	Young			
	ER	6,000,591	12/1999	Alexander			
	FR	D426,699	06/2000	Dickerson			
	GR	US2002/0124297 A1	Publ. Date: 09/2002	Caris et al.			
	HR	4,121,797	10/1978	MacNeil			
	IR	4,320,883	03/1982	Bass			
	JR	4,881,746	11/1989	Andreesen			
	KR	D351,068	10/1994	Grimes			
	LR						
	MR						
	NR						

FOREIGN PATENT DOCUMENTS

English Abstract

Translation Readily Available

	Document Number	Date MM/YYYY	Country	Inventor Name	Enclosed	No	Enclosed	No
OR					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PR					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
QR					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
RR					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SR					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TR					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
UR					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
VR					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
WR					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
XR					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

OTHER (Including in this order Author, Title, Periodical Name, Pertinent Pages, etc.)

YR			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ZR			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
AAR			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Examiner: *Robert J. Brady* Date Considered: *11 June 2005*

\*EXAMINER: Initial if citation considered, whether or not citation is in conformance with MPEP § 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to Applicant.